

POSITION	ID NO.	DATE
CLASSIFIER	32	9/26/85
EXAMINER	38	10/1/85
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.	407	10-5-85
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
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SYMBOLS

<	Rejected
=	Allowed
-	Through number
+	Canceled
N	Restricted
*	Non-elected
A	Interference
—	Appeal
0	Objected

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